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INPORMATION DISCLOSURE STATEMENT TRANSMITTAL

To Commissioner For Patents
Enclosed herewith is a Form PTO-1449, required copies of documents listed thereon, and a concise explanation of their relevance is described below or enclosed herewith per 37 CFR 1.97.

| Application Number | 10/039,689 |
|------------------------|------------------|
| Filing Date | October 29, 2001 |
| First Named Inventor | Thomas Burger |
| Group Art Unit | 2811 |
| Examiner Name | |
| Attorney Docket Number | PHAT 000063 |

| considerefere | ments may be relevant in that they have bee dered in drafting the specification of the enced application; in the specification of the above-referenceation; | above- | RECEIVED MAR 15 2002 TC 2800 MAIL ROOM | |
|---|---|--------|--|--|
| previously submitted or cited in U.S. patent application(s) which are relied on for an earlier effective filing date under 35 U.S.C. 120 (no copy required); or | | | | |
| <pre>X cited as an "X" or "Y" document in a foreign Patent Office search report on a foreign counterpart application, a copy of which report is also enclosed; I hereby certify that these documents were first cited in any communication with a foreign Patent Office for a counterpart foreign application not more than three (3) months ago; otherwise a concise explanation of the relevance of each document is append hereto. I hereby certify that not one of these documents was cited in any communication with a foreign Patent Office nor was any known to any individual designated in §1.56(c) more than three (3) months ago.</pre> | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED | | | | |
| Name (Print Type) Signature | STEVEN R. BIREN Registration No. (Attorney/Age Date 317/02 | | 6,531 | |
| CERTIFICATE OF MAILING OR TRANSMISSION | | | | |
| I hereby certify that this is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office tel# :on the date below: | | | | |
| Name (Print Type) EDNA CHAPA | | | | |
| Signature | Edwa Chara | Date 3 | 1/2/02 | |